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Bib Data Sheet

CONFIRMATION NO. 1135

|                             |                                       |              |                        |   |
|-----------------------------|---------------------------------------|--------------|------------------------|---|
| SERIAL NUMBER<br>10/604,136 | FILING DATE<br>06/27/2003<br><br>RULE | CLASS<br>216 | GROUP ART UNIT<br>1765 | ATTORNEY<br>DOCKET NO.<br>BUR920020125US1 |
|-----------------------------|---------------------------------------|--------------|------------------------|---|

## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

*"NONE"*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*"NONE"*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/05/2003

|  |                           |                        |                       |                            |
|--|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>VT | SHEETS<br>DRAWING<br>7 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                        |                       |                            |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials <i>SA</i>  |                           |                        |                       |                            |

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## TITLE

DETECTION OF HARDMASK REMOVAL USING A SELECTIVE ETCH

|                                   |   |  |
|-----------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>750 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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